NEEDS ASSESSMENT SURVEY'S FINDINGS FORM

Planning Area: East Texas HMAZ/LMAZ Area: Galveston

BDTP: F/MS SUBPOPULATION: African American women (1,12)

	# of surveys completed: 13	
	Information from needs assessment surveys	Assessment
Risk Behaviors (13,15,16, 22,24,25, 26,27,28,29 30,33)	 46% reported two or more partners in the past year; 31% reported more than 3 partners in the past year. None of the respondents indicated they had a sex partners in the past year who have HIV. 8% of F/MS African American women indicated they knew if at least one of their sex partners in the past year had an STD. 38% say they had been treated for an STD in the past year, and 31% have been treated multiple times for an STD in the past year. 23% reported engaging in anal sex. Of those engaging in anal sex, 67% reported never using a condom. 73% almost never use a condom for oral sex. 54% almost never use a condom for vaginal sex. The only location indicated by African American F/MS women where they engaged in risky behaviors was home mentioned by 8% of respondents. The top things African American F/MS women said they do to keep from getting HIV are (in order): only have sex with one partner [77%]¹, sometimes use a condom for protection [77%], don't inject drugs [77%], and don't abuse drugs or alcohol [77%]. Survey respondents indicated a similar pattern of responses for protection against STDs. 	 A moderate proportion of the respondents reported they have engaged in sex with multiple partners. There is a moderate prevalence of HIV and STDs in the population based on the morbidity profile for this population. Reported condom use for anal sex is worse than reported in the risk profile. Condom use for oral and vaginal sex is similar to that reported in the risk profile. Although there were few responses, African American F/MS women indicated they engaged in risky behaviors at home. This should be taken into account when trying to reach this population.

Numbers noted in parentheses () indicate questions number on the needs assessment survey which correspond to that category.

^{*}Denotes the factors that influence behaviors (FIBs). See Tab 8 TDH Insert, Selecting and Prioritizing Interventions for a more detailed description.

The bracketed number [x] indicates the proportion of respondents indicating that location (may add up to more than 100%).

² Information collected from the Counseling and Testing System for HIV positives, 1999-2000.

	# of surveys completed: 13	
	Information from needs assessment surveys	Assessment
*Knowledge (9,11)	Among African American F/MS women: • 100% indicated that anal sex without a condom may increase a person's chance of getting HIV, 69% for getting STDs other than HIV. • 85% and 92% indicated that oral and vaginal sex without a condom, respectively, may increase a person's chance of getting HIV and 62% and 100%, respectively, for getting STDs other than HIV. • 92% indicated that sex-trade work may increase a person's chance of getting HIV, and for getting STDs other than HIV. • 92% indicated that unprotected sex under the influence may increase a person's chance of getting HIV and for getting STDs other than HIV. • 92% indicated sex with more than one partner may increase a person's chance of getting HIV and for getting STDs other than HIV. • 100% indicated that injecting drugs and sharing works may increase a person's chance of getting HIV, 46% for getting STDs other than HIV. • 92% indicated that having sex with women may increase a person's chance of getting HIV and for getting STDs other than HIV. • 92% indicated that thaving sex with women may increase a person's chance of getting HIV and for getting STDs other than HIV. • 92% indicated that engaging in sex with a woman who has engaged in risky behaviors may increase a person's chance of getting HIV and for getting STDs other than HIV. • 100% indicated that blood transfusions may increase a person's chance of getting HIV, 54% for getting STDs other than HIV. • 100% indicated that needle sticks may increase a person's chance of getting HIV, 54% for getting STDs other than HIV. • 100% indicated that a being born to a mother with HIV may increase a person's chance of getting HIV, 54% for getting STDs other than HIV.	Over 90% of the respondents showed good knowledge of HIV and STD transmission routes. Primary barriers to condom Primary barriers to condom
& beliefs (10,32,34)	 indicated they were between agreeing and strongly agreeing that a person should tell their sex partner(s) if they have HIV or an STD whether using condoms or not. The top reasons African American F/MS women indicated they had sex without a condom are (in order): they trust their partner [31%]¹, don't like condoms [31%], and partner refused to use a condom 	use were partnership issues such as trust and refusal from partners, and not liking condoms. • Considering the morbidity rates in this community, and the risk activities, the personal perception of risk may be

Numbers noted in parentheses () indicate questions number on the needs assessment survey which correspond to that category. *Denotes the factors that influence behaviors (FIBs). See Tab 8 TDH Insert, Selecting and Prioritizing Interventions for a more detailed description.

The bracketed number [x] indicates the proportion of respondents indicating that location (may add up to more than 100%). ² Information collected from the Counseling and Testing System for HIV positives, 1999-2000.

	# of surveys completed: 13	
	Information from needs assessment surveys	Assessment
	 [23%]. 54% indicated they were not likely to get HIV, and 50% indicated they were not likely to get an STD. 	appropriate.
*Current communication skills (14)	 Half of the African American F/MS women who responded indicated they have talked about getting HIV with at-least some of their partners. Half of the African American F/MS women who responded indicated they have talked about getting an STD other than HIV with at-least some of their partners. 	Half of the African American F/MS women indicated they have discussed risks for an STD or HIV with their partner. Considering that this sub-population thinks discussing risks to be important, this suggests the need for additional communication skills in F/MS African American women in this area.
*Social/peer support (17)	When asked who they would tell if they had contracted HIV or an STD other than HIV, the following proportions of African American F/MS women indicated they would tell: • Their family; 100% for HIV, 82% for an STD. • Their current partner(s); 100% for HIV, 89% for an STD. • Their past partner(s); 100% for HIV, 50% for an STD. • Their friends; 100% for HIV, 100% for an STD.	The majority of the respondents reported they would be comfortable telling family, friends and partners if they contracted HIV. The responses for STDs were lower than for HIV.
Testing history/need for testing (18-23)	 38% of survey respondents indicated they have tested in the past year. Of those who were tested, they tested an average of 2.3 times per year. The top reasons African American F/MS women indicated they have tested are (in order): part of routine care [15%]¹, had sex without using a condom [15%], and pregnancy [8%]. The reasons African American F/MS women indicated they have not tested were (in order): don't think they are at risk [15%]¹, don't want to know they have it [15%], not sexually active [8%], and afraid someone will find out [8%]. 8% of those surveyed, and 20% of those individuals who tested in the past year indicated they have tested positive for HIV. 	 Testing proportions for these respondents is moderate with only 38% of this group testing each year. Those who test, do so an average of 2.3 times a year, about two tests for every three partners reported last year. Emphasis should be placed on getting those who don't test and engage in risky activities to test regularly and overcoming the barriers to their testing. 15% of respondents indicated HIV testing as a preventive behavior, part of routine care.

Numbers noted in parentheses () indicate questions number on the needs assessment survey which correspond to that category. *Denotes the factors that influence behaviors (FIBs). See Tab 8 TDH Insert, Selecting and Prioritizing Interventions for a more detailed description.

The bracketed number [x] indicates the proportion of respondents indicating that location (may add up to more than

² Information collected from the Counseling and Testing System for HIV positives, 1999-2000.

	# of surveys completed: 13	
	Information from needs assessment surveys	Assessment
	 54% of the respondents tested for an STD other than HIV in the past year. Of those testing, they tested an average of 1.8 times a year. 71% of African American F/MS women who have tested for an STD in the past year indicated they have tested positive for an STD. 80% of respondents treated for an STD in the past year indicated they have been treated for multiple times in the past year. The top reasons cited for not testing for an STD were (in order): not at risk [15%]¹, not sexually active [8%], don't believe it would help them to know they have an STD [8%], and they are afraid someone would find out [8%]. 15% of respondents indicated they have tested for Hepatitis A in the past year, 15% for Hepatitis B, 15% for Hepatitis C, and 23% tested for Tuberculosis. 31% of respondents who didn't test indicated they did not test because they did not believe they were at risk for those diseases and 15% indicated they had no symptoms. 	 A high proportion of the respondents indicated they were tested for an STD in the past year. The frequency of testing (1.8 times a year for those who tested) is less than the average number of partners reported in the past year, 3.4. Between 15 and 25% of respondents indicated they have been tested for other diseases in the past year. This supports the critical nature of referrals to appropriate providers.
Prevention services currently accessed (19,21)	 The top four locations African American F/MS women go for an HIV test are (in order): hospital [15%]¹, family planning clinic [8%], drug treatment center [8%], and other public clinic [11%]. The top locations African American F/MS women go for an STD test are (in order): other public clinic [23%]¹, hospital [23%], doctor's office [8%], and public STD clinic [8%]. 8% of respondents indicated barriers in their community to seeking prevention services. The only barrier mentioned was that the programs or clinics are too crowded or the wait is too long [8%]¹. The top locations where African American F/MS women have gotten HIV and STD information are (in order): public health clinics [23%]¹, community-based organizations [15%], health care providers [15%], and other health clinics [15%]. The top locations where African American F/MS women have gotten information on HIV and STDs that has helped them are (in order): public health clinics [23%]¹, community-based organizations [15%], health care providers [15%], and other health clinics [23%], health care providers [15%], and other health clinics [15%], health care providers [15%], and other health clinics [15%], health care providers [15%], and other health clinics [15%]. 	 The primary source for HIV testing is through private providers but many seek testing through publicly funded care providers and family planning clinics. 8% of respondents indicated barriers to accessing HIV and STD prevention services. Waiting time and crowded conditions at clinics was cited as a barrier to accessing services. The primary source of HIV and STD information reported by the survey respondents was primarily through public funded clinics, private providers, and community-based organizations. The most useful information was obtained from community-based organizations, health clinics, and private providers,.
Prevention	For those indicating they wanted to know more to	Basic information on

Numbers noted in parentheses () indicate questions number on the needs assessment survey which correspond to that category. *Denotes the factors that influence behaviors (FIBs). See Tab 8 TDH Insert, Selecting and Prioritizing Interventions for a more detailed description.

The bracketed number [x] indicates the proportion of respondents indicating that location (may add up to more than 100%).

² Information collected from the Counseling and Testing System for HIV positives, 1999-2000.

	# of surveys completed: 13	
	Information from needs assessment surveys	Assessment
needs (35-39)	help protect them from acquiring HIV, the following activities were requested (in order): basic information on HIV/STDs [85%] ¹ , how to have safe sex [69%], how to talk with partners about using condoms [46%], and how to use condoms [38%]. • Primary locations where African American F/MS women indicated they would get information on HIV and STDs in the future are (in order): drug treatment centers [77%] ¹ , community-based organizations [77%], public health clinics [77%], counseling and testing centers [69%], and other health clinics [69%]. • Primary locations where African American F/MS women indicated they would NEVER get information on HIV or STDs in the future are (in order): bars [23%] ¹ , bath houses [23%], work [23%], and the newspaper [23%].	HIV/STDs, how to have safe sex, and communication skills training lead the activities wanted by African American F/MS women as needed services. • The primary locations where African American F/MS women indicated they would go to get HIV and STD information are public clinics, community-based organizations, and drug treatment centers. • The primary locations where African American F/MS women would never seek HIV or STD prevention messages are bars, bathhouses, work, and the newspapers.

Numbers noted in parentheses () indicate questions number on the needs assessment survey which correspond to that category. *Denotes the factors that influence behaviors (FIBs). See Tab 8 TDH Insert, Selecting and Prioritizing Interventions for a more detailed description.

The bracketed number [x] indicates the proportion of respondents indicating that location (may add up to more than 100%). ² Information collected from the Counseling and Testing System for HIV positives, 1999-2000.

	# of surveys completed: 13	
	Information from needs assessment surveys	Assessment
Specific Information about HIV ⁺ from HIV ⁺ risk profiles	Statewide for all HIV positive African American F/MS women ² : • 50% of F/MS African American women HIV positive individuals indicated they never used a condom for anal sex, 36% for vaginal sex, and 59% for oral sex. • Nearly 23% indicated an STD diagnosis in the past year. • 36% indicated more than 1 sex partner in the past year. • Less than 15% indicated some sex trade work in the past year, primarily selling sex. • 64% indicated substance use with sex in the past year. • Nearly half indicated their partners were at risk, and 32% indicated their partners had multiple partners. • The top drugs used during sex were: alcohol [39%] ¹ , cocaine [35%] and marijuana [26%]. For all HIV positive F/MS women in the Galveston HMAZ ² : • No information is available on condom use for anal sex in this behavioral category. 57% indicated never using a condom for vaginal sex and 83% of these women reported never using a condom for oral sex. • 12% indicated an STD diagnosis in the past year. • 25% indicated they had more than 1 partner in the past year. • 12% of HIV positive F/MS woman in the Galveston HMAZ indicated selling sex. • 69% indicated substance use with sex in the past year. • 89% indicated their partner was at risk, and 31% indicated their partners had multiple partners. • The top drugs used during sex were: alcohol [60%] ¹ , marijuana [25%], and cocaine [20%].	 The proportion of African American F/MS women positives reporting using a condom for vaginal sex is similar to that reported in the needs assessment. The proportion of HIV positives with a recent STD diagnosis is significant, approximately two in ten having an STD in the past year. This is particularly troublesome considering the proportion (25 to 35%) with multiple sex partners in the past year. HIV positive F/MS African American women indicate a high perception of their partner's risk (50 to 90%). The drugs of choice for HIV positives are alcohol, cocaine, and marijuana.

Numbers noted in parentheses () indicate questions number on the needs assessment survey which correspond to that category. *Denotes the factors that influence behaviors (FIBs). See Tab 8 TDH Insert, Selecting and Prioritizing Interventions for a more detailed description.

The bracketed number [x] indicates the proportion of respondents indicating that location (may add up to more than

² Information collected from the Counseling and Testing System for HIV positives, 1999-2000.